

STANDLEY & GILCREST

Attorneys and Counselors at Law



March 8, 1996

555 Metro Place North

Suite 500

Dublin, Ohio 43017-1375

Telephone (614) 792-5555

Telecopier (614) 792-5536

VIA FIRST CLASS MAIL

Honorable Commissioner of
Patents and Trademarks
Washington, D.C. 20231
Attn: Application Processing Division
Special Processing and Correspondence Branch

RE: U.S. Patent Application Serial No. 08/563,642
Inventor: Dr. Anthony Joseph
Entitled: SYSTEM FOR EVALUATING
TREATMENT OF CHEST PAIN PATIENTS
Filed: November 28, 1995
Attorney Docket No.: 1151-002

Dear Sir:

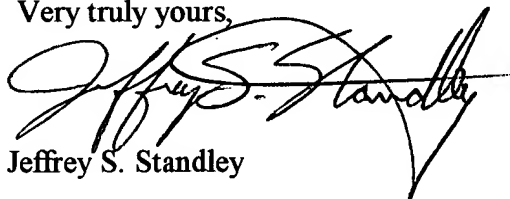
Enclosed please find the Declaration and Power of Attorney in response to the Notice to File Missing Parts of Application mailed February 21, 1996.

Also enclosed is a Verified Statement Claiming Small Entity Status signed by the applicant.

Our check in the amount of \$65.00 is enclosed to cover the small entity surcharge.

Please date stamp and return the attached postcard to our office.

Very truly yours,



Jeffrey S. Standley

JSS:lak
Enclosures

I:\clients\joseph\002\notmiss.doc



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
--------------------	-------------	-----------------------	------------------------

08/563,642 11/28/95 JOSEPH A 1151-002

0262/0221

STANDLEY & GILCREST
555 METRO PLACE NORTH
SUITE 500
DUBLIN OH 43017

0000

DATE MAILED:

**NOTICE TO FILE MISSING PARTS OF APPLICATION
FILING DATE GRANTED**

02/21/96

An Application Number and Filing Date have been assigned to this application. However, the items indicated below are missing. The required items and fees identified below must be timely submitted **ALONG WITH THE PAYMENT OF A SURCHARGE** for items 1 and 3-6 only of \$ 750 for large entities or \$ 75 for small entities who have filed a verified statement claiming such status. The surcharge is set forth in 37 CFR 1.16(e).

If all required items on this form are filed within the period set below, the total amount owed by applicant as a ☐ large entity, ☐ small entity (verified statement filed), is \$ 750.00.

Applicant is given **ONE MONTH FROM THE DATE OF THIS LETTER, OR TWO MONTHS FROM THE FILING DATE** of this application, **WHICHEVER IS LATER**, within which to file all required items and pay any fees required above to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

1. ☐ The statutory basic filing fee is: ☐ missing ☐ insufficient. Applicant as a ☐ large entity ☐ small entity, must submit \$ _____ to complete the basic filing fee.
2. ☐ Additional claim fees of \$ _____ as a ☐ large entity, ☐ small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.
3. ☐ The oath or declaration:
☐ is missing.
☐ does not cover items omitted at time of execution.

An oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date is required.
4. ☐ The oath or declaration does not identify the application to which it applies. An oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
5. ☒ The signature(s) to the oath or declaration is/are: ☒ missing; ☐ by a person other than the inventor or a person qualified under 37 CFR 1.42, 1.43, or 1.47. A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
6. ☐ The signature of the following joint inventor(s) is missing from the oath or declaration:

_____. An oath or declaration listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.
7. ☐ The application was filed in a language other than English. Applicant must file a verified English translation of the application and a fee of \$ _____ under 37 CFR 1.17(k), unless this fee has already been paid.
8. ☐ A \$ _____ processing fee is required since your check was returned without payment. (37 CFR 1.21(m)).
9. ☐ Your filing receipt was mailed in error because your check was returned without payment.
10. ☐ The application does not comply with the Sequence Rules. See attached Notice to Comply with Sequence Rules 37 CFR 1.821-1.825.
11. ☐ Other.

Direct the response and any questions about this notice to, Attention: Application Processing Division, Special Processing and Correspondence Branch (703) 308-1202.

A copy of this notice MUST be returned with the response.